

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

LIBERTARIAN NATIONAL COMMITTEE, INC.

ADDRESS (number and street) ▼

2600 VIRGINIA AVE NW

SUITE 200

☐ Check if different than previously reported. (ACC)

WASHINGTON

DC

20037

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00255695

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15
Quarterly Report (Q1)☐ July 15
Quarterly Report (Q2)☐ October 15
Quarterly Report (Q3)☐ January 31
Year-End Report (YE)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☒ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Timothy R. Hagan

Signature of Treasurer

Timothy R. Hagan

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

LIBERTARIAN NATIONAL COMMITTEE, INC.

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y Y
01		01		2014

To:

M M	/	D D	/	Y Y Y Y Y
01		31		2014

	COLUMN A This Period	COLUMN B Calendar Year-to-Date															
6. (a) Cash on Hand January 1, <table><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td colspan="5">2014</td></tr></table>	Y	Y	Y	Y	Y	2014						<table><tr><td colspan="5">392983.99</td></tr></table>	392983.99				
Y	Y	Y	Y	Y													
2014																	
392983.99																	
(b) Cash on Hand at Beginning of Reporting Period.....	<table><tr><td colspan="5">392983.99</td></tr></table>	392983.99															
392983.99																	
(c) Total Receipts (from Line 19)	<table><tr><td colspan="5">126351.17</td></tr></table>	126351.17					<table><tr><td colspan="5">126351.17</td></tr></table>	126351.17									
126351.17																	
126351.17																	
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<table><tr><td colspan="5">519335.16</td></tr></table>	519335.16					<table><tr><td colspan="5">519335.16</td></tr></table>	519335.16									
519335.16																	
519335.16																	
7. Total Disbursements (from Line 31).....	<table><tr><td colspan="5">139420.30</td></tr></table>	139420.30					<table><tr><td colspan="5">139420.30</td></tr></table>	139420.30									
139420.30																	
139420.30																	
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<table><tr><td colspan="5">379914.86</td></tr></table>	379914.86					<table><tr><td colspan="5">379914.86</td></tr></table>	379914.86									
379914.86																	
379914.86																	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<table><tr><td colspan="5">25000.00</td></tr></table>	25000.00															
25000.00																	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<table><tr><td colspan="5">0.00</td></tr></table>	0.00															
0.00																	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

LIBERTARIAN NATIONAL COMMITTEE, INC.

Report Covering the Period:

From:

M M M	/	D D D	/	Y Y Y Y Y
01	/	01	/	2014

To:

M M M	/	D D D	/	Y Y Y Y Y
01	/	31	/	2014

I. Receipts
COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

43320.25

43320.25

(ii) Unitemized

83030.92

83030.92

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

126351.17

126351.17

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5)

126351.17

126351.17

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3)

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),
12, 13, 14, 15, 16, 17, and 18(c))..... ▶

126351.17

126351.17

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)

126351.17

126351.17

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	139420.30	139420.30
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	139420.30	139420.30
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	139420.30	139420.30
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	139420.30	139420.30

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	126351.17	126351.17
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	126351.17	126351.17
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	139420.30	139420.30
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	139420.30	139420.30

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFH'G7 <98I @ 'CF' +H9A-N5HCB

Form/Schedule: F3XN

Transaction ID :

The Committee wishes to disclose the following: 1) No expenditures designated on Schedule B supporting Line 21b were made on behalf of any specifically identified federal candidate(s). 2) The Libertarian National Committee (LNC) requests address, employer, and occupation information from all contributors whose yearly aggregate contributions exceed \$200.00 and informs them of the requirement of complying with 11 CFR 104.7(b)(1). In the event that the information is not supplied as a result of the initial request, Committee makes a subsequent attempt to collect the information by mail, email, or telephone contact within 30 days of the initial contribution. This 'follow up' request a) clearly asks for the missing information without requesting a contribution, b) informs the contributor of the requirements for reporting such information under federal law, and c) is enclosed with a pre-addressed envelope when sent by postal mail. If the information is submitted after the initial monthly report is filed, the contributor master file is updated and the information is updated in memo entries filed with the next regularly scheduled report. The Committee also makes periodic requests during the year for all contributors to update their contact information and for contributors whose yearly contributions aggregate to more than \$200 to update their Employer/Occupation information.

Form/Schedule:

Transaction ID:

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 7 OF 71

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Beth Ballentine

Mailing Address 31 Metacom Dr

City
Simsbury

State
CT

Zip Code
06070-1851

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self Employed

Freelance Writer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

01 / 06 / 2014

Transaction ID : SA11AI.128370

Amount of Each Receipt this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

B. Robert C. W. Benedict Jr.

Mailing Address 2301 E St NW Apt A311

City
Washington

State
DC

Zip Code
20037-2805

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Libertarian National Committee

Executive Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

378.49

Date of Receipt

01 / 10 / 2014

Transaction ID : SA11AI.131719

Amount of Each Receipt this Period

350.50

In-kind - Contribution of Books to LNC

Full Name (Last, First, Middle Initial)

C. Mr. John S. Buckley

Mailing Address 1030 N Monroe St

City
Arlington

State
VA

Zip Code
22201-4504

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Information Requested

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

01 / 09 / 2014

Transaction ID : SA11AI.128652

Amount of Each Receipt this Period

1000.00

Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2350.50

: 97 `A=G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A=N5HCB
.

Form/Schedule: SA11AI

Transaction ID : SA11AI.131719

Contribution of books to LNC purchased from Amazon.com 1200 12th Avenue South #1200 Seattle, Washington
98144

Form/Schedule:

Transaction ID:

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 71

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Estate of Raymond Groves Burrington

Mailing Address C/of Estate of R. G. Burrington
 109 Northshore Dr Ste 303

City State Zip Code
 Knoxville TN 37919-4925

FEC ID number of contributing
 federal political committee.

C

Name of Employer

Occupation

Deceased

Deceased

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15744.75

Date of Receipt

M M / D D / Y Y Y Y Y Y
 01 / 16 / 2014

Transaction ID : SA11AI.128681

Amount of Each Receipt this Period

15744.75

Contribution

Full Name (Last, First, Middle Initial)

B. Joyce Sadie Calloway

Mailing Address 309 Tanner Ct

City State Zip Code
 Kernersville NC 27284-2465

FEC ID number of contributing
 federal political committee.

C

Name of Employer

Occupation

retired

retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 01 / 24 / 2014

Transaction ID : SA11AI.128704

Amount of Each Receipt this Period

250.00

Contribution

Full Name (Last, First, Middle Initial)

C. David R. Cheeseman

Mailing Address PO Box 700

City State Zip Code
 Groton CT 06349-5700

FEC ID number of contributing
 federal political committee.

C

Name of Employer

Occupation

United States Navy

Ensign

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 01 / 02 / 2014

Transaction ID : SA11AI.128775

Amount of Each Receipt this Period

1000.00

Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

16994.75

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 OF 71

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Kelvin Contreary

Mailing Address 1 Wren St

City State Zip Code
 New Orleans LA 70124-4121

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Self Employed

Medical Doctor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
 01 / 10 / 2014

Transaction ID : SA11AI.128844

Amount of Each Receipt this Period

750.00

Contribution

Full Name (Last, First, Middle Initial)

B. Curtis A. Cook

Mailing Address 19051 86th Ave NE

City State Zip Code
 Bothell WA 98011-2111

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Peak Systems, Inc.

Technician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
 01 / 02 / 2014

Transaction ID : SA11AI.128850

Amount of Each Receipt this Period

250.00

Contribution

Full Name (Last, First, Middle Initial)

C. James Dacey

Mailing Address 405 Appian Way

City State Zip Code
 Doylestown PA 18901-2046

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Self Employed

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
 01 / 27 / 2014

Transaction ID : SA11AI.128918

Amount of Each Receipt this Period

250.00

Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1250.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 11 OF 71

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Mr. Lynden F. Davis

Mailing Address 555 Pierce St Apt 1305

City
Albany

State
CA

Zip Code
94706-1004

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

01 / 27 / 2014

Transaction ID : SA11AI.128946

Amount of Each Receipt this Period

500.00

Contribution

Full Name (Last, First, Middle Initial)

B. Joel B. Dixon

Mailing Address 136 NW 20th St

City

Oklahoma City

State

OK

Zip Code

73103-4406

FEC ID number of contributing
federal political committee.

C

Name of Employer

Chesapeake Energy

Occupation

Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

01 / 08 / 2014

Transaction ID : SA11AI.128994

Amount of Each Receipt this Period

225.00

Contribution

Full Name (Last, First, Middle Initial)

C. Jim Dodds

Mailing Address 4321 Summer Breeze Ter

City

Vero Beach

State

FL

Zip Code

32967-1835

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

01 / 27 / 2014

Transaction ID : SA11AI.129002

Amount of Each Receipt this Period

500.00

Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1225.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 12 OF 71

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Dr. Garth R. Drewry M.D.

Mailing Address 5210 Pine Rocklands Ave

City State Zip Code
 Lithia FL 33547-5012

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

01 / 13 / 2014

Transaction ID : SA11AI.129031

Amount of Each Receipt this Period

250.00

Contribution

Full Name (Last, First, Middle Initial)

B. Samuel J. Edelston

Mailing Address 34 Daffodil Ln

City State Zip Code
 Cos Cob CT 06807-1412

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Boardroom Inc

Mgt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

01 / 06 / 2014

Transaction ID : SA11AI.129064

Amount of Each Receipt this Period

250.00

Contribution

Full Name (Last, First, Middle Initial)

C. Russell Fauver

Mailing Address 260 Sandy Hill Rd

City State Zip Code
 Hartsville SC 29550-0460

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self Employed

Aircraft Mechanic

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

01 / 10 / 2014

Transaction ID : SA11AI.129137

Amount of Each Receipt this Period

250.00

Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

750.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 13 OF 71

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Ken Heinemann

Mailing Address 611 W Via Alamos

City State Zip Code
 Green Valley AZ 85614-3971

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

01 / 27 / 2014

Transaction ID : SA11AI.129502

Amount of Each Receipt this Period

250.00

Contribution

Full Name (Last, First, Middle Initial)

B. Edward D. Hersey

Mailing Address 90 Grandview Dr

City State Zip Code
 Glastonbury CT 06033-3931

FEC ID number of contributing
federal political committee.

C

Name of Employer

Downtown Data Recovery, LLC

Occupation

Computers

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

01 / 22 / 2014

Transaction ID : SA11AI.129530

Amount of Each Receipt this Period

100.00

Contribution

Full Name (Last, First, Middle Initial)

C. Mr. Duane M Horton

Mailing Address PO Box 4413

City State Zip Code
 Middletown RI 02842-0413

FEC ID number of contributing
federal political committee.

C

Name of Employer

Uncle Sam

Occupation

taxpayer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

01 / 29 / 2014

Transaction ID : SA11AI.129606

Amount of Each Receipt this Period

250.00

Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

600.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 OF 71

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Mr. Hoyt Huggins

Mailing Address 1793 Rubidoux Ter

City State Zip Code
 Brentwood CA 94513-6427

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Retired

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 01 / 29 / 2014

Transaction ID : SA11AI.129630

Amount of Each Receipt this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

B. Gary Edward Johnson

Mailing Address 2001 Parker Ln Apt 134

City State Zip Code
 Austin TX 78741-3849

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Self Employed

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y
 06 / 13 / 2013

Transaction ID : SA11AI.131739

Amount of Each Receipt this Period

25000.00

Contribution-Treasurer's Best Efforts

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Gary Edward Johnson

Mailing Address 2001 Parker Ln Apt 134

City State Zip Code
 Austin TX 78741-3849

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Self Employed

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y
 07 / 01 / 2013

Transaction ID : SA11AI.131740

Amount of Each Receipt this Period

10.00

Contribution-Treasurer's Best Efforts

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1000.00

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: SA11AI

Transaction ID : SA11AI.131739

Additional information received as a result of Treasurer's Best Efforts

Form/Schedule: SA11AI

Transaction ID: SA11AI.131740

Additional information received as a result of Treasurer's Best Efforts

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 16 OF 71

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Gary Edward Johnson

Mailing Address 2001 Parker Ln Apt 134

City

Austin

State

TX

Zip Code

78741-3849

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Information Requested

Aggregate Year-to-Date ▼

Date of Receipt

08 / 01 / 2013

Transaction ID : SA11AI.131741

Amount of Each Receipt this Period

10.00

Contribution-Treasurer's Best Efforts

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Gary Edward Johnson

Mailing Address 2001 Parker Ln Apt 134

City

Austin

State

TX

Zip Code

78741-3849

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Information Requested

Aggregate Year-to-Date ▼

Date of Receipt

09 / 02 / 2013

Transaction ID : SA11AI.131742

Amount of Each Receipt this Period

10.00

Contribution-Treasurer's Best Efforts

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Gary Edward Johnson

Mailing Address 2001 Parker Ln Apt 134

City

Austin

State

TX

Zip Code

78741-3849

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Information Requested

Aggregate Year-to-Date ▼

Date of Receipt

10 / 01 / 2013

Transaction ID : SA11AI.131743

Amount of Each Receipt this Period

10.00

Contribution-Treasurer's Best Efforts

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.00

: 97 `A-G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: SA11AI

Transaction ID : SA11AI.131741

Additional information received as a result of Treasurer's Best Efforts

Form/Schedule: SA11AI

Transaction ID: SA11AI.131742

Additional information received as a result of Treasurer's Best Efforts

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: SA11AI

Transaction ID : SA11AI.131743

Additional information received as a result of Treasurer's Best Efforts

Form/Schedule:

Transaction ID:

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 19 OF 71

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Gary Edward Johnson

Mailing Address 2001 Parker Ln Apt 134

City
Austin

State
TX

Zip Code
78741-3849

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Information Requested

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 01 / 2013

Transaction ID : SA11AI.131726

Amount of Each Receipt this Period

10.00

Contribution- Treasurer's Best Efforts

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Gary Edward Johnson

Mailing Address 2001 Parker Ln Apt 134

City
Austin

State
TX

Zip Code
78741-3849

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Information Requested

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 02 / 2013

Transaction ID : SA11AI.131744

Amount of Each Receipt this Period

10.00

Contribution-Treasurer's Best Efforts

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Cynthia Keaton

Mailing Address 109 Tanbark Cir

City
Coppell

State
TX

Zip Code
75019-2219

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Retired

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
01 / 06 / 2014

Transaction ID : SA11AI.129771

Amount of Each Receipt this Period

250.00

Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

250.00

: 97 `A-G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: SA11AI

Transaction ID : SA11AI.131726

Additional information received as a result of Treasurer's Best Efforts

Form/Schedule: SA11AI

Transaction ID: SA11AI.131744

Additional information received as a result of Treasurer's Best Efforts

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 OF 71

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Wes Kerr

Mailing Address 28105 W Hazen Rd

City State Zip Code
 Buckeye AZ 85326-5201

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Self Employed

Dairy Farmer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 01 / 06 / 2014

Transaction ID : SA11AI.129794

Amount of Each Receipt this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

B. Mr. David L. Maris

Mailing Address 684 Benicia Dr Apt 57

City State Zip Code
 Santa Rosa CA 95409-3074

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Retired

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
 01 / 29 / 2014

Transaction ID : SA11AI.130082

Amount of Each Receipt this Period

100.00

Contribution

Full Name (Last, First, Middle Initial)

C. Ms. Wanda Myers

Mailing Address 5103 Carew St

City State Zip Code
 Houston TX 77096-1401

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Unemployed

Domestic Caregiver/Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
 01 / 24 / 2014

Transaction ID : SA11AI.130343

Amount of Each Receipt this Period

250.00

Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1350.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 OF 71

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Carla Nauman

Mailing Address 37708 Arkansas Ave

City

Rosedale

State

OK

Zip Code

74831-7632

FEC ID number of contributing
federal political committee.

C

Name of Employer

City of Purcell

Occupation

Dispatcher

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 10 / 2013

Transaction ID : SA11AI.131727

Amount of Each Receipt this Period

500.00

Contribution-Treasurer's Best Efforts

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Mr. Larry Nicholas

Mailing Address 2618 Huron St

City

Bellingham

State

WA

Zip Code

98226-4117

FEC ID number of contributing
federal political committee.

C

Name of Employer

Accurate Lock & Security

Occupation

Locksmith

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
01 / 14 / 2014

Transaction ID : SA11AI.130369

Amount of Each Receipt this Period

600.00

Contribution

Full Name (Last, First, Middle Initial)

c. Mary Galen O'Connor

Mailing Address 5429 Lyndale Ave N

City

Brooklyn Center

State

MN

Zip Code

55430-3201

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
01 / 06 / 2014

Transaction ID : SA11AI.130398

Amount of Each Receipt this Period

500.00

Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1100.00

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: SA11AI

Transaction ID : SA11AI.131727

Additional information received as a result of Treasurer's Best Efforts

Form/Schedule:

Transaction ID:

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 24 OF 71
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Mr. Charles Ohmstead

Mailing Address PO Box 847

City State Zip Code
 Forest City NC 28043-0847

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self Employed

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
 01 / 09 / 2014

Transaction ID : SA11AI.130406

Amount of Each Receipt this Period

250.00

Contribution

Full Name (Last, First, Middle Initial)

B. Mr. Norman T. Olsen

Mailing Address 7931 S Broadway # 102

City State Zip Code
 Littleton CO 80122-2710

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

M M / D D / Y Y Y Y Y
 01 / 21 / 2014

Transaction ID : SA11AI.130415

Amount of Each Receipt this Period

600.00

Contribution

Full Name (Last, First, Middle Initial)

C. Mr. William A. Paine

Mailing Address 11025 131st Ave NE

City State Zip Code
 Kirkland WA 98033-4767

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
 01 / 06 / 2014

Transaction ID : SA11AI.130455

Amount of Each Receipt this Period

250.00

Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1100.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 25 OF 71

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Mrs. Nynke Peirce

Mailing Address 1428 Coral Ave

City

Vero Beach

State

FL

Zip Code

32963-2338

FEC ID number of contributing
federal political committee.

C

Name of Employer

Not Employed

Occupation

Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
01 / 24 / 2014

Transaction ID : SA11AI.130498

Amount of Each Receipt this Period

250.00

Contribution

Full Name (Last, First, Middle Initial)

B. Prof. William S. Peirce

Mailing Address PO Box 154

City

Gates Mills

State

OH

Zip Code

44040-0154

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
01 / 24 / 2014

Transaction ID : SA11AI.130499

Amount of Each Receipt this Period

250.00

Contribution

Full Name (Last, First, Middle Initial)

C. Ms. Pamela E. Potter

Mailing Address 538 Spring Place Rd NE

City

White

State

GA

Zip Code

30184-2232

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
01 / 02 / 2014

Transaction ID : SA11AI.130580

Amount of Each Receipt this Period

500.00

Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 26 OF 71

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. John R. Reid

Mailing Address 690 Zink Ave

City State Zip Code
 Santa Barbara CA 93111-2809

FEC ID number of contributing federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y
 07 / 01 / 2013

Transaction ID : SA11AI.131729

Amount of Each Receipt this Period

30.00

Contribution-Treasurer's Best Efforts

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. John R. Reid

Mailing Address 690 Zink Ave

City State Zip Code
 Santa Barbara CA 93111-2809

FEC ID number of contributing federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y
 08 / 01 / 2013

Transaction ID : SA11AI.131730

Amount of Each Receipt this Period

30.00

Contribution-Treasurer's Best Efforts

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. John R. Reid

Mailing Address 690 Zink Ave

City State Zip Code
 Santa Barbara CA 93111-2809

FEC ID number of contributing federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y
 09 / 02 / 2013

Transaction ID : SA11AI.131731

Amount of Each Receipt this Period

30.00

Contribution-Treasurer's Best Efforts

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.00

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SA11AI

Transaction ID : SA11AI.131729

Additional information received as a result of Treasurer's Best Efforts

Form/Schedule: SA11AI

Transaction ID: SA11AI.131730

Additional information received as a result of Treasurer's Best Efforts

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 28 OF 71

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. John R. Reid

Mailing Address 690 Zink Ave

City

Santa Barbara

State

CA

Zip Code

93111-2809

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 01 / 2013

Transaction ID : SA11Al.131736

Amount of Each Receipt this Period

30.00

Contribution-Treasurer's Best Efforts

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. John R. Reid

Mailing Address 690 Zink Ave

City

Santa Barbara

State

CA

Zip Code

93111-2809

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 01 / 2013

Transaction ID : SA11Al.131737

Amount of Each Receipt this Period

30.00

Contribution-Treasurer's Best Efforts

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. John R. Reid

Mailing Address 690 Zink Ave

City

Santa Barbara

State

CA

Zip Code

93111-2809

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 02 / 2013

Transaction ID : SA11Al.131738

Amount of Each Receipt this Period

30.00

Contribution-Treasurer's Best Efforts

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.00

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: SA11AI

Transaction ID : SA11AI.131736

Additional information received as a result of Treasurer's Best Efforts

Form/Schedule: SA11AI

Transaction ID: SA11AI.131737

Additional information received as a result of Treasurer's Best Efforts

: 97 `A=G79 @G B9CI G`H9LH`F9 @G H98 `HC`5 `F9DCFHŽG7 <98I @G `CF`+H9A=N5HCB
.

Form/Schedule: SA11AI

Transaction ID : SA11AI.131738

Additional information received as a result of Treasurer's Best Efforts

Form/Schedule:

Transaction ID:

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 31 OF 71

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Mr. Martin Riske

Mailing Address 3109 13th Ave S

City State Zip Code
 Fargo ND 58103-3506

FEC ID number of contributing federal political committee.

C

Name of Employer

MJR Corp

Occupation

Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 01 / 15 / 2014

Transaction ID : SA11AI.130691

Amount of Each Receipt this Period

5000.00

Contribution

Full Name (Last, First, Middle Initial)

B. Dr. Gil Robinson

Mailing Address 5150 Broadway St # 610

City State Zip Code
 San Antonio TX 78209-5710

FEC ID number of contributing federal political committee.

C

Name of Employer

Self Employed

Occupation

PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
 01 / 15 / 2014

Transaction ID : SA11AI.130709

Amount of Each Receipt this Period

250.00

Contribution

Full Name (Last, First, Middle Initial)

C. Jerry Ryan

Mailing Address 6171 S Marion Ave

City State Zip Code
 Tulsa OK 74136-1506

FEC ID number of contributing federal political committee.

C

Name of Employer

Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
 01 / 15 / 2014

Transaction ID : SA11AI.130773

Amount of Each Receipt this Period

250.00

Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

5500.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 32 OF 71

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Mr. Robert Sarvis

Mailing Address 4713 Major Ct

City

Alexandria

State

VA

Zip Code

22312-2239

FEC ID number of contributing
federal political committee.

C

Name of Employer

Mercatus Center at GMU

Occupation

Economics Research

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

01 / 29 / 2014

Transaction ID : SA11AI.130797

Amount of Each Receipt this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

B. John Sinde

Mailing Address PO Box 217

City

Fairfield

State

CA

Zip Code

94533-0021

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pandamerica Imports, Inc.

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

01 / 06 / 2014

Transaction ID : SA11AI.130949

Amount of Each Receipt this Period

250.00

Contribution

Full Name (Last, First, Middle Initial)

C. Ryan Smith

Mailing Address 1119 S Mission Rd # 336

City

Fallbrook

State

CA

Zip Code

92028-3225

FEC ID number of contributing
federal political committee.

C

Name of Employer

Chevron

Occupation

Geophysicist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

01 / 02 / 2014

Transaction ID : SA11AI.130994

Amount of Each Receipt this Period

500.00

Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1750.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 33 OF 71

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Mr. Samuel S. Stewart Jr.

Mailing Address 269 A St

City

Salt Lake City

State

UT

Zip Code

84103-2511

FEC ID number of contributing
federal political committee.

C

Name of Employer

Wasatch Advisors Incorporated

Occupation

Executive VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

01 / 21 / 2014

Transaction ID : SA11AI.131072

Amount of Each Receipt this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

B. Keith Sutton

Mailing Address 10030 Sand Key St

City

Las Vegas

State

NV

Zip Code

89178-4859

FEC ID number of contributing
federal political committee.

C

Name of Employer

Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

01 / 23 / 2014

Transaction ID : SA11AI.131122

Amount of Each Receipt this Period

500.00

Contribution

Full Name (Last, First, Middle Initial)

C. Kenneth Sweet

Mailing Address 43 Newfield Ave Apt 11

City

Waterbury

State

CT

Zip Code

06708-2331

FEC ID number of contributing
federal political committee.

C

Name of Employer

Campion Ambulance Service, Inc.

Occupation

Paramedic

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

01 / 21 / 2014

Transaction ID : SA11AI.131134

Amount of Each Receipt this Period

300.00

Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1800.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 34 OF 71

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. James Tate

Mailing Address 2449 Chimney Springs Dr

City State Zip Code
 Marietta GA 30062-5733

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Lockheed Martin Aero

Occupation
 Mechanic

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

01 / 21 / 2014

Transaction ID : SA11AI.131152

Amount of Each Receipt this Period

250.00

Contribution

Full Name (Last, First, Middle Initial)

B. Mr. Charles B. Tolleson Sr.

Mailing Address 916 Lido Ln

City State Zip Code
 Foster City CA 94404-2934

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Retired

Occupation
 Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

01 / 07 / 2014

Transaction ID : SA11AI.131224

Amount of Each Receipt this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

C. Steven Tucker

Mailing Address 2117 Larkwood Dr

City State Zip Code
 Hoover AL 35226-1118

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Shelby County Sheriffs Office

Occupation
 Deputy Sheriff

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

01 / 21 / 2014

Transaction ID : SA11AI.131261

Amount of Each Receipt this Period

1000.00

Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2250.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 35 OF 71

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Nicholas Vakula

Mailing Address 5235 E Cholla St

City

Scottsdale

State

AZ

Zip Code

85254-4718

FEC ID number of contributing
federal political committee.

C

Name of Employer

The Vakula Law Firm, P.C.

Occupation

Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

01 / 02 / 2014

Transaction ID : SA11AI.131284

Amount of Each Receipt this Period

250.00

Contribution

Full Name (Last, First, Middle Initial)

B. Vann H. Walke

Mailing Address 210 Prince George St

City

Annapolis

State

MD

Zip Code

21401-1613

FEC ID number of contributing
federal political committee.

C

Name of Employer

The Boeing Company

Occupation

IT Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

01 / 10 / 2014

Transaction ID : SA11AI.131349

Amount of Each Receipt this Period

250.00

Contribution

Full Name (Last, First, Middle Initial)

C. Edward B. Wright

Mailing Address 1796 Highway 25

City

Guthrie Center

State

IA

Zip Code

50115-8741

FEC ID number of contributing
federal political committee.

C

Name of Employer

Broker Dealer Financial Services Corp

Occupation

Investment Broker & Advisor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

01 / 06 / 2014

Transaction ID : SA11AI.131511

Amount of Each Receipt this Period

1000.00

Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1500.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 36 OF 71

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Edward B. Wright

Mailing Address 1796 Highway 25

City

Guthrie Center

State

IA

Zip Code

50115-8741

FEC ID number of contributing
federal political committee.

C

Name of Employer

Broker Dealer Financial Services Corp

Occupation

Investment Broker & Advisor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

01 / 30 / 2014

Transaction ID : SA11AI.131512

Amount of Each Receipt this Period

300.00

Contribution

Full Name (Last, First, Middle Initial)

B. Edward B. Wright

Mailing Address 1796 Highway 25

City

Guthrie Center

State

IA

Zip Code

50115-8741

FEC ID number of contributing
federal political committee.

C

Name of Employer

Broker Dealer Financial Services Corp

Occupation

Investment Broker & Advisor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2300.00

Date of Receipt

01 / 30 / 2014

Transaction ID : SA11AI.131513

Amount of Each Receipt this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

C. Dr. Jonathan & Holly Wright

Mailing Address 36638 32nd Ave S

City

Auburn

State

WA

Zip Code

98001-8842

FEC ID number of contributing
federal political committee.

C

Name of Employer

Tahoma Clinic

Occupation

Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

01 / 21 / 2014

Transaction ID : SA11AI.131516

Amount of Each Receipt this Period

250.00

Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1550.00

43320.25

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 37 OF 71

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Advocates for Self Government

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1				1	4		2	0	1	4		

Mailing Address 1010 N Tennessee St.
Suite 215

City Cartersville State GA Zip Code 30120-8528

Purpose of Disbursement
Books for Web Fundraising Promotion

003

Candidate Name

Category/
Type**Transaction ID : SB21B.131576**

Amount of Each Disbursement this Period

1465.81

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. Advocates for Self Government

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1				2	3		2	0	1	4		

Mailing Address 1010 N Tennessee St.
Suite 215

City Cartersville State GA Zip Code 30120-8528

Purpose of Disbursement
Books for Web Fundraising Promotion

003

Candidate Name

Category/
Type**Transaction ID : SB21B.131577**

Amount of Each Disbursement this Period

1335.94

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. American National Insurance Co.

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1				3	1		2	0	1	4		

Mailing Address PO Box 1830

City Galveston State TX Zip Code 77553-1830

Purpose of Disbursement
LP 401k Contributions

001

Candidate Name

Category/
Type**Transaction ID : SB21B.131578**

Amount of Each Disbursement this Period

3083.54

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

5885.29

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

LIBERTARIAN NATIONAL COMMITTEE, INC.

Category/
Type

507.60

01 / 10 / 2014

Category/
Type

350.50

Category/
Type

2410.57

3268.67

FEC Schedule B (Form 3X) Rev. 02/2003

: 97 `A-G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB
.

Form/Schedule: SB21B

Transaction ID : SB21B.131720

Contribution of books to LNC purchased from Amazon.com 1200 12th Avenue South #1200 Seattle, Washington
98144

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 40 OF 71

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Robert C. Benedict

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1				2	9		2	0	1	4		

Mailing Address 2301 E St NW
Apt A311

City Washington State DC Zip Code 20037-0000

Purpose of Disbursement
Employee Net Pay

001

Candidate Name

Category/
Type**Transaction ID : SB21B.131582**

Amount of Each Disbursement this Period

2410.57

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. Robert C. Benedict

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1				2	9		2	0	1	4		

Mailing Address 2301 E St NW
Apt A311

City Washington State DC Zip Code 20037-0000

Purpose of Disbursement
Employee Net Pay

001

Candidate Name

Category/
Type**Transaction ID : SB21B.131583**

Amount of Each Disbursement this Period

7992.36

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. Bigeye Direct, Inc.

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1				0	7		2	0	1	4		

Mailing Address PO Box 710865

City Oak Hill State VA Zip Code 20171-0865

Purpose of Disbursement
Non Candidate Party Printing and Mailing Service

003

Candidate Name

Category/
Type**Transaction ID : SB21B.131584**

Amount of Each Disbursement this Period

599.62

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1	1	0	0	2	.	5	5
---	---	---	---	---	---	---	---

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 41 OF 71

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Bigeye Direct, Inc.

Mailing Address PO Box 710865

City State Zip Code
Oak Hill VA 20171-0865

Purpose of Disbursement
Non Candidate Party Printing and Mailing Service

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 23 2014
Transaction ID : SB21B.131585

Amount of Each Disbursement this Period

1583.32

Full Name (Last, First, Middle Initial)

B. DC Office of Tax & Revenue

Mailing Address 941 North Capitol St, NE 6th Flr

City State Zip Code
Washington DC 20002-0000

Purpose of Disbursement
DC - Unemployment Company

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 14 2014
Transaction ID : SB21B.131591

Amount of Each Disbursement this Period

225.12

Full Name (Last, First, Middle Initial)

C. DC Office of Tax & Revenue

Mailing Address 941 North Capitol St, NE 6th Flr

City State Zip Code
Washington DC 20002-0000

Purpose of Disbursement
DC - Withholding

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 14 2014
Transaction ID : SB21B.131592

Amount of Each Disbursement this Period

297.45

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2105.89

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

LIBERTARIAN NATIONAL COMMITTEE, INC.

22.92

B. DC Office of Tax & Revenue

MM / DD / YYYY

Amount of Each Disbursement this Period

16.11

C. DC Office of Tax & Revenue

M M / D D / Y Y Y Y
01 28 2014

Amount of Each Disbursement this Period

183.39

State: District:

222.42

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

LIBERTARIAN NATIONAL COMMITTEE, INC.

128.87

State: District:

MM / DD / YYYY

1090.74

State: District:

MM / DD / YYYY

Amount of Each Disbursement this Period

297.45

State: District:

1517.06

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

LIBERTARIAN NATIONAL COMMITTEE, INC.

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 45 OF 71

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Dominick J. Dunbar

Mailing Address 470 Raven Rd

City Stafford	State VA	Zip Code 22554-4006
------------------	-------------	------------------------

Purpose of Disbursement
Employee Net Pay

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		15		2014

Transaction ID : SB21B.131602

Amount of Each Disbursement this Period

355.13

Full Name (Last, First, Middle Initial)

B. Dominick J. Dunbar

Mailing Address 470 Raven Rd

City Stafford	State VA	Zip Code 22554-4006
------------------	-------------	------------------------

Purpose of Disbursement
Employee Net Pay

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		29		2014

Transaction ID : SB21B.131603

Amount of Each Disbursement this Period

375.20

Full Name (Last, First, Middle Initial)

C. Paula Edwards

Mailing Address 1200 G Street, N.W. Suite 800

City Washington	State DC	Zip Code 20005-0000
--------------------	-------------	------------------------

Purpose of Disbursement
Fec Filing and Amendments

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		07		2014

Transaction ID : SB21B.131604

Amount of Each Disbursement this Period

1500.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2230.33

--

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 46 OF 71

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Financial Agent Federal Tax Deposit

Mailing Address PO Box 970030

City St. Louis State MO Zip Code 63197-0030

Purpose of Disbursement
Federal Withholding

001

Candidate Name

Category/
Type
Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 / 14 / 2014
Transaction ID : SB21B.131606

Amount of Each Disbursement this Period

1802.00

Full Name (Last, First, Middle Initial)

B. Financial Agent Federal Tax Deposit

Mailing Address PO Box 970030

City St. Louis State MO Zip Code 63197-0030

Purpose of Disbursement
Medicare Company

001

Candidate Name

Category/
Type
Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 / 14 / 2014
Transaction ID : SB21B.131607

Amount of Each Disbursement this Period

204.02

Full Name (Last, First, Middle Initial)

C. Financial Agent Federal Tax Deposit

Mailing Address PO Box 970030

City St. Louis State MO Zip Code 63197-0030

Purpose of Disbursement
Medicare Employee

001

Candidate Name

Category/
Type
Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 / 14 / 2014
Transaction ID : SB21B.131608

Amount of Each Disbursement this Period

204.02

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2210.04

X	21b		22		23		24		25		26
	27		28a		28b		28c		29		30b

LIBERTARIAN NATIONAL COMMITTEE, INC.

Category/
Type

872.35

MM / DD / YYYY

Category/
Type

872.35

M M / D D / Y Y Y Y
01 28 2014

Category/
Type

44.77

1789.47

FEC Schedule B (Form 3X) Rev. 02/2003

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

LIBERTARIAN NATIONAL COMMITTEE, INC.

Category/
Type

48.33

Category/
Type

Amount of Each Disbursement this Period

Category/
Type

1010 30

7733.33

TOTAL This Period (last page this line number only).....

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

LIBERTARIAN NATIONAL COMMITTEE, INC.

00.

Category/
Type

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

MM / DD / YYYY

00

Category/
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

M M / D D / Y Y Y Y
01 28 2014

00-

Category/
Type

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

State: District:

964.26

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 50 OF 71

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Financial Agent Federal Tax Deposit

Date of Disbursement

M	M		D	D		Y	Y	Y	Y		
0	1		2	8		2	0	1	4		

Mailing Address PO Box 970030

City	State	Zip Code
St. Louis	MO	63197-0030

Purpose of Disbursement
Medicare Employee

001

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Transaction ID : SB21B.131618

Amount of Each Disbursement this Period

2	1	1	6	0							
2	1	1	6	0							

Full Name (Last, First, Middle Initial)

B. Financial Agent Federal Tax Deposit

Date of Disbursement

M	M		D	D		Y	Y	Y	Y		
0	1		2	8		2	0	1	4		

Mailing Address PO Box 970030

City	State	Zip Code
St. Louis	MO	63197-0030

Purpose of Disbursement
Social Security Company

001

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Transaction ID : SB21B.131619

Amount of Each Disbursement this Period

1	6	0	9	.	1	6					
1	6	0	9	.	1	6					

Full Name (Last, First, Middle Initial)

C. Financial Agent Federal Tax Deposit

Date of Disbursement

M	M		D	D		Y	Y	Y	Y		
0	1		2	8		2	0	1	4		

Mailing Address PO Box 970030

City	State	Zip Code
St. Louis	MO	63197-0030

Purpose of Disbursement
Social Security Company

001

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Transaction ID : SB21B.131620

Amount of Each Disbursement this Period

9	0	4	.	7	6						
9	0	4	.	7	6						

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2725.52

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 51 OF 71

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Financial Agent Federal Tax Deposit

Mailing Address PO Box 970030

City St. Louis State MO Zip Code 63197-0030

Purpose of Disbursement
Social Security Employee

001

Candidate Name

Category/
Type
Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 / 28 / 2014
Transaction ID : SB21B.131621

Amount of Each Disbursement this Period

1609.16

Full Name (Last, First, Middle Initial)

B. Financial Agent Federal Tax Deposit

Mailing Address PO Box 970030

City St. Louis State MO Zip Code 63197-0030

Purpose of Disbursement
Social Security Employee

001

Candidate Name

Category/
Type
Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 / 28 / 2014
Transaction ID : SB21B.131622

Amount of Each Disbursement this Period

904.76

Full Name (Last, First, Middle Initial)

C. FP Mailing Solutions

Mailing Address PO Box 4510

City Carol Stream State IL Zip Code 60197-4510

Purpose of Disbursement
Postage & Meter Resets

003

Candidate Name

Category/
Type
Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 / 31 / 2014
Transaction ID : SB21B.131625

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

4513.92

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 52 OF 71

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. GreenPenz2600 Virginia Ave LLC

Mailing Address PO Box 823784

City	State	Zip Code
Philadelphia	PA	19182-3784

Purpose of Disbursement
Office Rent, Tax, Maintenance & Utilities

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		23		2014

Transaction ID : SB21B.131626

Amount of Each Disbursement this Period

11243.25

Full Name (Last, First, Middle Initial)

B. Casey T. HansenMailing Address 1445 Ogden St. NW
Apt #212

City	State	Zip Code
Washington	DC	20010-0000

Purpose of Disbursement
Employee Net Pay

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		15		2014

Transaction ID : SB21B.131627

Amount of Each Disbursement this Period

1125.64

Full Name (Last, First, Middle Initial)

C. Casey T. HansenMailing Address 1445 Ogden St. NW
Apt #212

City	State	Zip Code
Washington	DC	20010-0000

Purpose of Disbursement
Employee Net Pay

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		29		2014

Transaction ID : SB21B.131628

Amount of Each Disbursement this Period

1125.63

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

13494.52

--

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

LIBERTARIAN NATIONAL COMMITTEE, INC.

Three 7-segment displays are shown, each with a different color (blue, green, red) and a different font (serif, sans-serif, and a mix). The first display shows '01', the second shows '15', and the third shows '2014'. The displays are arranged horizontally and separated by slashes.

2084.91

State: District:

MM / DD / YYYY

2084.91

State: District:

MM / DD / YYYY

6973.38

State: District:

11143.20

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 54 OF 71

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Robert Johnston

Mailing Address P. O. Box 35064

City Baltimore State MD Zip Code 21222-5064

Purpose of Disbursement
Contract labor admin services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 / 13 / 2014
Transaction ID : SB21B.131633

Amount of Each Disbursement this Period

1944.00

Full Name (Last, First, Middle Initial)

B. Robert Johnston

Mailing Address P. O. Box 35064

City Baltimore State MD Zip Code 21222-5064

Purpose of Disbursement
Contract labor admin services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 / 27 / 2014
Transaction ID : SB21B.131634

Amount of Each Disbursement this Period

2261.25

Full Name (Last, First, Middle Initial)

C. Robert S. KrausMailing Address 2500 N. Van Dorn
Apt 1608

City Alexandria State VA Zip Code 22302-0000

Purpose of Disbursement
Employee Net Pay

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 / 15 / 2014
Transaction ID : SB21B.131635

Amount of Each Disbursement this Period

1501.40

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

5706.65

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 55 OF 71

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Robert S. Kraus

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1				2	9		2	0	1	4		

Mailing Address 2500 N. Van Dorn
Apt 1608

City Alexandria State VA Zip Code 22302-0000

Purpose of Disbursement
Employee Net Pay

001

Candidate Name

Category/
Type**Transaction ID : SB21B.131636**

Amount of Each Disbursement this Period

1789.15

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. MBH Settlement Group, LC

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1				1	7		2	0	1	4		

Mailing Address 228 S. Washington Street, Ste. #10

City Alexandria State VA Zip Code 22314-0000

Purpose of Disbursement
Deposit for Real Estate PurchaseCategory/
Type**Transaction ID : SB21B.131724**

Amount of Each Disbursement this Period

25000.00

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. Merchant Services

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1				3	1		2	0	1	4		

Mailing Address 890 Mountain Ave

City New Providence State NJ Zip Code 07974-0000

Purpose of Disbursement
Merchant Processing Fee

001

Candidate Name

Category/
Type**Transaction ID : SB21B.131638**

Amount of Each Disbursement this Period

431.54

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

27220.69

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 56 OF 71

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. PayPal Merchant Services

Mailing Address 2211 N. First St.

City San Jose State CA Zip Code 95131-0000

Purpose of Disbursement
Merchant Processing Fee

001

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 / 31 / 2014
Transaction ID : SB21B.131640

Amount of Each Disbursement this Period

1595.48

Full Name (Last, First, Middle Initial)

B. Piryx, Inc.

Mailing Address 144 2nd St. 1st Floor

City San Francisco State CA Zip Code 94105-0000

Purpose of Disbursement
Merchant Processing Fee

001

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 / 31 / 2014
Transaction ID : SB21B.131641

Amount of Each Disbursement this Period

631.65

Full Name (Last, First, Middle Initial)

C. PNC Bank

Mailing Address 2600 Virginia Ave NW

City Washington State DC Zip Code 20037-0000

Purpose of Disbursement
Reverse Bank Deposit Error from 12/10/2013 (See Memo)

001

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 / 07 / 2014
Transaction ID : SB21B.131718

Amount of Each Disbursement this Period

3155.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

5382.13

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +9A-N5HCB
.

Form/Schedule: SB21B

Transaction ID : SB21B.131718

PNC bank made an error in recording a deposit that was not corrected until 1/7/2014. We recorded the error on Schedule D, Line 10 and on Schedule A, Line 15 of the 2013 Year End Report. This entry is to record the bank's reversal of the error.

Form/Schedule:

Transaction ID:

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

LIBERTARIAN NATIONAL COMMITTEE, INC.

A. PNC Bank

00:

279.71

Category/
Type

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Full Name (Last, First, Middle Initial)

B. PNC Visa Card

00

8577.47

Category/
Type

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. ClearSky24, Inc.

The image shows three 3x3 grids, each representing a number using the letters M, D, and Y. The first grid shows '01' with 'M' in the top-left and top-right positions. The second grid shows '21' with 'D' in the top-left and top-right positions. The third grid shows '2014' with 'Y' in the top-left, top-right, middle-right, and bottom-right positions.

00-

2250.07

Category/
Type

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

State: District:

8857.18

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 59 OF 71

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. CVS US - Caremark Corp.

Mailing Address 2530 Virginia Avenue NW

City
WashingtonState
DCZip Code
20037-0000Purpose of Disbursement
Office Supplies

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y
01 / 14 / 2014
Transaction ID : SB21B.131643.1

Amount of Each Disbursement this Period

18.50

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. DataJack, Inc.

Mailing Address 14911 Quorum Drive #140

City
DallasState
TXZip Code
75254-0000Purpose of Disbursement
WIFI Internet Services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y
01 / 15 / 2014
Transaction ID : SB21B.131643.2

Amount of Each Disbursement this Period

9.99

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Facebook, Inc.

Mailing Address 1601 S. California Ave

City
Palo AltoState
CAZip Code
94304-0000Purpose of Disbursement
Facebook Advertising

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y
01 / 08 / 2014
Transaction ID : SB21B.131643.3

Amount of Each Disbursement this Period

127.84

[MEMO ITEM]**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 60 OF 71

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Frontier Airlines

Mailing Address 7001 Tower Road

City State Zip Code
Denver CO 80249-7312
Purpose of Disbursement
Staff Travel-Air

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y
01 04 2014
Transaction ID : SB21B.131643.4

Amount of Each Disbursement this Period

258.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. GoDaddy.com, Inc.

Mailing Address 14455 N Hayden Rd # 226

City State Zip Code
Scottsdale AZ 85260-6993
Purpose of Disbursement
Domain Name Registration

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y
01 03 2014
Transaction ID : SB21B.131643.5

Amount of Each Disbursement this Period

56.68

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. hotels.comMailing Address 10440 North Central Expressway
Suite 400
City State Zip Code
Dallas TX 75231-0000
Purpose of Disbursement
Staff Travel - Hotel

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y
01 05 2014
Transaction ID : SB21B.131643.6

Amount of Each Disbursement this Period

201.40

[MEMO ITEM]**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 62 OF 71

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Melissa Data Corp

Mailing Address 22382 Avenida Empresa

City	State	Zip Code
Rancho Santa Margarita	CA	92688-2112

Purpose of Disbursement
Member Email Cleaning Service

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		02		2014

Transaction ID : SB21B.131643.10

Amount of Each Disbursement this Period

400.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Postmaster

Mailing Address 2500 Virginia Ave NW

City	State	Zip Code
Washington	DC	20037-0000

Purpose of Disbursement
Postage and Shipping

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		06		2014

Transaction ID : SB21B.131643.11

Amount of Each Disbursement this Period

65.30

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Rackspace US Inc.

Mailing Address 9725 Datapoint Dr. #100

City	State	Zip Code
San Antonio	TX	78229-0000

Purpose of Disbursement
Website Hosting Expense

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		07		2014

Transaction ID : SB21B.131643.12

Amount of Each Disbursement this Period

752.93

[MEMO ITEM]**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

--

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

LIBERTARIAN NATIONAL COMMITTEE, INC.

[MEMO ITEM]

[MEMO ITEM]

[MEMO ITEM]

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Postmaster - BRM Permit

001

Category/
Type

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼



1035.00

B. QuickBooks Payroll Service

001

Category/
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Age Group	Percentage
18-24	126.90
25-34	100.00
35-44	80.00
45-54	60.00
55-64	40.00
65-74	20.00
75-84	10.00
85+	5.00

C. QuickBooks Payroll Service

001

Category/
Type

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

6.34

1168.24

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

LIBERTARIAN NATIONAL COMMITTEE, INC.

Category/ Type	001
-------------------	-----

A horizontal bar with a value of 22.20. The bar is light gray with a darker gray border. The value "22.20" is displayed in black text at the right end of the bar.

State: District:

001
Category/
Type

792.20

State: District:

Category/ Type	001
-------------------	-----

792.20

State: District:



1606.60

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

LIBERTARIAN NATIONAL COMMITTEE, INC.

00:

Category/
Type

3000.00

MM / DD / YYYY

00

Category/
Type

3814.63

MM / DD / YYYY

00-

Category/
Type

6265.59

13080.22

TOTAL This Period (last page this line number only).....

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

LIBERTARIAN NATIONAL COMMITTEE, INC.

440.00

589.00

468.00

138504.30

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 69 OF 71

FOR LINE NUMBER:
(check only one)☒ 9
☐ 10

NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

MBH Settlement Group, LC

Nature of Debt (Purpose):

Deposit for Real Estate Purchase

Mailing Address 228 S. Washington Street, Ste. #10

City State

Zip Code

Alexandria

VA

22314-0000

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD9.131723

Amount Incurred This Period

25000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

25000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional)..... ►

25000.00

2) **TOTALS** This Period (last page this line number only)..... ►

25000.00

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

25000.00

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 70 OF 71

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

PNC Bank

Nature of Debt (Purpose):
Bank error (See Memo)

Mailing Address 2600 Virginia Ave NW

City State

Zip Code

Washington

DC

20037-0000

Outstanding Balance Beginning This Period

3155.00

Transaction ID : SD10.128229

Amount Incurred This Period

0.00

Payment This Period

3155.00

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional)..... ►

0.00

2) **TOTALS** This Period (last page this line number only)..... ►

0.00

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

: 97 `A=G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A=N5HCB
.

Form/Schedule: SD10

Transaction ID : SD10.128229

PNC bank made an error in recording a deposit that was not corrected until 1/7/2014. We have recorded the error here and on Schedule A, Line 15. The correction will be disclosed in the February, 2013 monthly report.

Form/Schedule:

Transaction ID: